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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patter, daybance orders and notification of maintenance fees will be maintenance incorrespondence correspondence address as indicated unless corrected below or directed ordinerwise in Block 1, by 63 specifying a new correspondence address, and/or (b) indicating a separate FEE ADDRESS* for

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20350 7590 10/17/2008 TOWNSEND AND TOWNSEND AND CREW, LLP TWO EMBARCADERO CENTER EIGHTH FLOOR				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail 18to 18SUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
SAN FRANCISCO, CA 94111-3834				(Depositor's name)		
				(Signature)		
				(Date)		
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVENTO		ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/758,711 01/15/2004		Axel K. Kloth		022150-000100US	6544	
TITLE OF INVENTION: METHOD AND APPARATUS FOR IMAGE PROCESSING						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE PREV. PAID ISSU	E FEE TOTAL FEE(S) DU	E DATE DUE
nonprovisional	YES	\$755	\$300	\$0	\$1055	01/20/2009
EXAMINER		ART UNIT	CLASS-SUBCLASS			
STREGE, JOHN B		2624	382-181000			
I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.53). Change of correspondence address (or Change of Correspondence Address form PTOSB/1/2) attached. Tee Address form PTOSB/1/2) attached. Tee Address indication (or "Fee Address" Indication form PTOSB/1/2; Nev 03-0/2 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attomorys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attent attomory or agent) and the names of up to 2 registered patent attomorys or agents. If no name is listed, no name with be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Parimics, Inc. Saratoga, CA						
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual XXX Corporation or other private group entity 🚨 Government						
4a. The following fee(s) at XX Issue Fee XX Publication Fee (No. XX Advance Order - #	small entity discount p	ermitted)	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. Will The Director is hereby authorized to charge hig required, fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 2D—24 30 (enclose an extra copy of this form).			
5. Change in Entity Status (from status indicated above)						
La. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. Lb. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in						
interest as shown by the records of the United States Patent and Trademark Office.						
Authorized Signature _	Kennet	t R. Allen			nuary 6, 2009	
Typed or printed name	Kenneth R.	Allen	Registration No. 27,301			
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